



GLASGOW GLADIATORS POWERCHAIR FOOTBALL CLUB



ENROLMENT FORM

PLAYERS DETAILS	
Players Name	
Address	
Postcode	
Date of Birth	

EMERGENCY CONTACT DETAILS				
Mother's Tel	Home		Mobile	
Father's Tel.	Home		Mobile	
Alternative Emergency Contact				
Name				
Relationship to Player				
Telephone	Home		Mobile	

DECLARATION:

I am enrolling myself / child (name) _____
with Glasgow Gladiators Powerchair Football Club.

I agree to abide by the Constitution and rules of the Club and will ensure, to the best of my ability, that I / my child adheres to its Code of Conduct. I also agree to abide by the Parent's Charter regarding conduct.

PLAYER / PARENT / GUARDIAN	
Name	
Email Address	
Signed	
Date	